into the allegations of financial mismanagement and other irregularities in Central Council for Research in Ayurveda and Siddha;

(b) whether the Committee has submitted its report to Government;

(c) if so, when and what are its recommendations;

(d) whether it is a fact that Government have sought opinion of Central Vigilance Commission on the report; and

(e) if reply to parts (a) and (b) above in the affirmative, what action Government have taken in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D.K. THARA DEVI SIDDHARTHA): (a) Yes, Sir.

(b) to (e) The Enquiry Officer submitted bis final report on 28.2.91. The report has been examined and based on the findings of the inquiry, the case was referred to the Central Vigilance Commission for their opinion. Appropriate departmental action is being taken on the advice of the Commission.

Infant Mortality Rate

2063. SHRI JAGADISH JANI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the infant mortality rate has been increasing in Orissa and several other states;

(b) if so, what was the position during the last three years; and

(c) what steps are being taken to check the infant mortality rate?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D.K. THARA DEVI SIDDHARTHA): (a) and (b) As per estimates provided by the Registrar General of India, Orissa and Jammu and Kashmir are the only two States which have been shown rise in Infant Mortality rates in 1990. The position in regard to Infant Mortality rate-in J&K and Orissa during the last three years are as follows:—

Year	Infant Mortality Rate (per thousands live births)	
	J&K	*Orissa*
1988	91	122
1989	66	121
1990	70	123

(c) The following steps have been initiated to reduce infant mortality rate:

1. Universal Immunization Programme to protect infants against Poliomyelitis, Tetanus, Diptheria, Whooping Cough, Tuberculosis and Measles.

2. Oral Rehydration Therapy Programme for controlling deaths due to dehydration caused by diarrhoea among children upto the age of 5 years.

3. Prophylaxis Scheme against nutritional anaemia among children and prophylaxis against blindness among children due to Vitamin 'A' deficiency.

4. Control of Acute Respiratory Infections to prevant deaths due to pneumonia.

दिल्ली प्रशासन द्वारा चलाई जा रही आयुर्वेदिक डिस्पेंसरियां

2064. **श्रीमती सरला माहेश्वरी:** क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि:

(क) दिल्ली प्रशासन द्वारा कितनी आयुर्वेदिक डिस्पेंसरियां चलाई जा रही हैं;

(ख) दिल्ली प्रशासन द्वारा आयुर्वेदिक पद्धति को लोकप्रिय बनाने की घोषणा किए जाने और इस पद्धति में जनसामान्य की बढ़ती रूचि को देखते हुए क्या सरकार और अधिक आयुर्वेदिक डिस्पेंसरियां खोलने का विचार रखती है; और

(ग) यदि हां, तो नई डिस्पेंसरियां कब तक खोले जाने की संभावना है?

स्वास्थ्य और परिवार कलयाण मंत्रालय में राज्य मंत्री (श्रीमती डी० के० तारादेवी सिद्धार्थ): (क) आयुर्वेदिक औषधालय दिल्ली नगर निगम, कर्मचारी राज्य बीमा निगम, केन्द्रीय सरकार स्वास्थ्य योजना, नई दिल्ली नगर पालिका तथा स्वयंसेवी संगठनों द्वारा चलाए जाती है। एजेंसी-वार स्थिति इस प्रकार है: